



Montgomery County Office of Consumer Protection  
100 Maryland Avenue, Suite 330  
Rockville, Maryland 20850  
www.montgomerycountymd.gov/consumer  
T: 240.777.3636 F: 240.777.3768



**RENEWAL Application for Secondhand Personal Property Dealers**

NOTICE: False statements to any of the following questions may constitute perjury. Perjury, fraudulent behavior or any violation of the conditions for the issuance of this license will result in refusal of license, or if granted, in revocation or suspension of same. Violations of the licensing provisions may result in criminal penalties. If this is a corporation, the President must be the Applicant.

**LICENSE NO.** \_\_\_\_\_

Federal Tax ID: \_\_\_\_\_

Business Type: ☐ Corporation ☐ Partnership ☐ Sole Owner

Applicant Name: \_\_\_\_\_  
MUST BE AN INDIVIDUAL AND NOT A  
BUSINESS/CORPORATE ENTITY

SSN: \_\_\_\_\_

Driver's License: \_\_\_\_\_ INCLUDE ISSUING STATE

Business Name: \_\_\_\_\_

Trade Name: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ **REQUIRED AS OF 6/1/2010**

Business Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

**BACKGROUND INFORMATION:**

Have you ever been convicted of theft or a felony? ☐ Yes ☐ No

If yes, state the nature of the offense: \_\_\_\_\_

Please indicate the locality where the conviction occurred and the date: \_\_\_\_\_

Please specify the penalty or punishment: \_\_\_\_\_

Has a license issued to you as a secondhand personal property dealer or pawnbroker ever been suspended or revoked in this or any other jurisdiction? ☐ Yes ☐ No

If yes, please explain: \_\_\_\_\_

Secondhand Personal Property Dealers RENEWAL Application

Page Two

Name and address of owner/leasing agent of premises from which your business will be conducted:

---

List name of all partners in your business:

---

Describe the nature of your business (e.g. pawnbroker, antiques, consignment, collections, or specialty store that acquires the covered second hand items): 

---

**Check all types of items that will be acquired or received during this renewal period:**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Bicycles  | <input type="checkbox"/> Furs/Leather            | <input type="checkbox"/> Power Tools             |
| <input type="checkbox"/> Carpets/Rugs  | <input type="checkbox"/> Jewelry                 | <input type="checkbox"/> Radio/Audio Equipment   |
| <input type="checkbox"/> Computer Equipment  | <input type="checkbox"/> Musical Instruments     | <input type="checkbox"/> Televisions             |
| <input type="checkbox"/> Electrical Equipment  | <input type="checkbox"/> Objets d'art            | <input type="checkbox"/> Typewriters/Calculators |
| <input type="checkbox"/> Fine China, Glass, Ceramics   | <input type="checkbox"/> Paintings               | <input type="checkbox"/> Video Equipment         |
| <input type="checkbox"/> Firearms  | <input type="checkbox"/> Photo/Optical Equipment | <input type="checkbox"/> Watches                 |
| <input type="checkbox"/> Other items, not listed above, that are serialized, engraved, or marked for personal identification purposes. |  |  |

I hereby AGREE to:

(1) authorize the Montgomery County Department of Police or any other police department with jurisdiction to inspect the records, inventory, and premises of the business during normal business hours;

(2) pay for the purchase of any secondhand personal property by check; and

(3) not cash any check, except a check issued by the dealer to pay for secondhand personal property, or as permitted by regulation.

I hereby CERTIFY that I have received an electronic copy of Chapter 44A of the Montgomery County Code, 1980, as amended, and am aware of the conditions, requirements, and penalties set forth therein. I do solemnly declare and affirm under the penalties of perjury, that the contents of this application are true and correct.

---

Signature of Applicant

---

Date

**INSTRUCTIONS:** Mail completed renewal application and check or money order (no cash is accepted) payable to “**Montgomery County Government**” in the amount of \$50.00 to Office of Consumer Protection, 100 Maryland Avenue, Room 330, Rockville, MD 20850. Only completed applications will be accepted.